

## Form CPF M 102: Campaign Finance Report **Municipal Form**

Office of Campaign and Political Finance

		(3)	N	Qm:
	File with:	City of Town Cler	k or Ele	ection Commission
Ending I	Date:	12/31/2020		3.5
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Elect Jar	ne Morga	n		
	Comm	ittee Name		
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Fill in Ke	eporting Period dates:	Beginning Date:		Ending I	Date: 12/31/2020	300
Type of	Report: (Check one)				ign 1964 hay p 3	8 22
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8th day	y preceding preliminary	8th day preceding electi	on [] 30 day	after election	year-end report	dissolution
Jane Pier	rce Morgan		Comm	ittee to Elect Jar	ne Morgan	
	Candidate Full Nam	e (if applicable)	de de la constante de la const		Committee Name	
School C	committee	**************************************	Kevin	Zawilski		
172 Pmt	Office Sought a	nd District	172.0		me of Committee Treasurer	
1/2 Didt	tle Street Residential	Address	1/2 Br	rattle Street	ommittee Mailing Address	
E-mail:			E-mail:	2010/00	@amail. Lo	laa .
	punepmorgan @	July Colin		counts 15	3,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Phone # (opt	ional):		Phone # (6	optional):		Martin Commence (Commence Commence Comm
L						
		SUMMARY BAL	ANCE INFO	RMATION:		
	I.'- 1. F. F. D.				435.4	43
	Line 1: Ending Ba	lance from previous repor	Į.			
	Line 2. Total recei	pts this period (page 3, lin	ne 11)			0
	Diffe 2. Total recei	pts uns period (page 3, im	C 11)			
	Line 3: Subtotal (l	ine 1 plus line 2)			435.4	43
		,				_
	Line 4: Total expe	nditures this period (page	5, line 14)			50
	Michigan do sono della				385.4	43
	Line 5: Ending Ba	lance (line 3 minus line 4)	ı		303.	75
= ( *	T. ( T. 1: 1:		3.7. ()	I		0
	Line 6: Total in-Ki	nd contributions this perio	d (page 6)	L		
	Line 7. Total (all)	outstanding liabilities (pag	ne 7)		ant to the second of the secon	0
	Dine 7. Total (all)				CONTRACTOR OF THE STATE OF THE	
	Line 8: Name of b	ank(s) used: Citizen's Bank	(			
		L				
1	Committee Treasurer:					
I certify that I	have examined this report included in the land in the	ing attached schedules and it is, to t ipts, expenditures, disbursements, in	he best of my knowle n-kind contributions	edge and belief, a tru and liabilities for thi	ne and complete statement of s reporting period and repres	f all campaign finance sents the campaign
finance activi	ty of all persons acting under the	authority or on behalf of this commi	ittee in accordance w	ith the requirements	of M.G.L. c. 55.	
Signed under	r the penalties of perjury:	terin Spiriski		(Treasurer's	s signature) Date:	1/20/2020
FOR CAN	DIDATE FILINGS ONL	Y: Affidavit of Candidate: (chec	ck 1 hov only)			MANY TO THE STATE OF THE STATE
		The same of the sa	The state of the s			
Loortific	ate with Committee that I have examined this report in	ncluding attached schedules and it is	s, to the best of my k	nowledge and belief	a true and complete stateme	ent of all campaign finance
activity,	of all persons acting under the au	thority or on behalf of this committee	ee in accordance with	the requirements of	M.G.L. c. 55. I have not re	ceived any contributions,
		nditures on my behalf during this re	porting period that a	re not otherwise disc	ciosed in this report.	
	te without Committee that I have examined this report in	ncluding attached schedules and it is	s, to the best of my k	nowledge and helief	a true and complete stateme	ent of all camnaion
finance a	activity, including contributions, le	oans, receipts, expenditures, disburs	sements, in-kind cont	tributions and liabilit	ies for this reporting period	and represents the
campaigi	n mance activity of all persons ac	ting under the authority or on behal		accordance with the	-	
Signed under	r the penalties of perjury:	are P. Mor	kun	(Candidate	's signature) Date:	1/20/2020

## **SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	(aphabetean labeling required)		(101 CONTINUED IN 01 0200 OF IMOTE)
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	·		
Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
Line 11: TOTAL R	RECEIPTS IN THE PERIOD		← Enter on page 1. line 2
	receipts of \$50 and under include them in line		1 0 7

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

## **SCHEDULE B: EXPENDITURES (continued)**

To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
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Andrew					
		A Company of the Comp			
		A CALLER TO A CALL			
		Transporter			
		Line 12: Expenditures over \$50	(or listed above)		
		Line 13: Expenditures \$50 and	under* (not listed above)		
	Enter on page 1 line $A \rightarrow$	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD		
		include them in line 12. Line 12 a			

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

## SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
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The state of the s				
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